

# TESTIMONY FOR THE EDUCATION COMMITTEE

February 22, 2012

Christine Rowan

Regarding

## S.B. No. 24 AN ACT CONCERNING EDUCATIONAL COMPETITIVENESS

Senator Stillman, Representative Fleischmann and members of the Education Committee: My name is Christine Rowan. I am a Connecticut resident and the mother of three young daughters. My oldest daughter, Amanda, is autistic and struggles with behavioral challenges typical of autism.

I am here today, on behalf of Amanda, our family and, as part of the Keep the Promise Children's Committee, other children of Connecticut, to ensure success in school for all kids, especially the ones who may present more of a challenge through behavioral or mental health issues. I am here today to remind the Education Committee that it is imperative that we consider the "whole child" when talking about education reform. A child must be ready to learn – physically and emotionally—before any substantive and successful learning can take place.

I would like to applaud the Governor, Commissioner Pryor and the Legislature for taking on education reform as a key issue. Commissioner Pryor recently identified special education students as part of the "at risk" student population. I would like to remind the Legislature that ***we cannot truly succeed in addressing the achievement gap in Connecticut without reforming the way in which we teach children with special needs.***

The lack of understanding and training from school staff in response to children's untreated behavioral health problems often lead to inappropriate interventions, such as seclusions. It is these inappropriate interventions that deprive children of an environment in which meaningful learning can take place.

During the 2007/2008 school year, my daughter, Amanda, was attending first grade in a Connecticut public school. At the time, Amanda had limited speech and ability to express herself. She suffered from anxiety and sensory issues. She had poor balance and extremely poor fine motor skills. Although Amanda was happy a lot of the time and enjoyed her classmates, she also had great difficulties with transitions, dropping to the floor, crying and whining. The school responded to Amanda's crying and whining by placing her in a time out room. At just ***seven years old***, over a seven month period of time, Amanda spent ***over forty (40) hours*** of seclusion in a small cinderblock time-out room – several minutes to one hour at a time per incident and sometimes up to several

hours per day collectively. The use of seclusion had made its way into Amanda's Individualized Education Plan. Amanda would be exhausted after a long stint in the seclusion room. Seclusion actually escalated Amanda's tantrums instead of diffusing them. Thus, she was unavailable for learning both during and after these traumatic time-outs occurred.

Other more positive behavioral interventions could have made learning more enjoyable for Amanda and reduced her behavioral challenges, lessened her frustration, increased her independence and allowed her to succeed in her schoolwork. For example, at the recommendation of several independent evaluators, I began requesting additional interventions to help Amanda: an AAC (assistive/augmentative communication) evaluation to help my daughter communicate especially when frustrated or upset; an AT (assistive technology) evaluation to address my daughter's severe fine motor problems and thus reduce frustration by making the work more accessible for her; ABA programming with staff trained in working with autistic children; and the help of a BCBA (Board Certified Behavior Analyst).

In my daughter's case, these other positive interventions could have continued to support her ability to remain in her public school and maintain her right to be educated in the least restrictive environment. I do believe that inclusion is the best learning model, if done with the appropriate supports in place. However, because these interventions were not implemented, we made the difficult decision to pull Amanda from the school and classmates she loved and unilaterally place her in a private special education school.

In order to improve the academic outcomes of special education students, the IEP team and school professionals must exhaust all reasonable positive interventions and supports specific to an individual child's needs rather than immediately resorting to more punitive or restrictive measures that take a child out of the learning environment.

Thank you for your time and attention.